

## DEPARTMENT OF HEALTH SERVICES

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August 23, 1995

TO: All County Welfare Directors  
All County Administrative Officers  
All County Medi-Cal Program Specialists/Liaisons

LETTER No: 95-46

**IMPLEMENTATION OF MEDS ON-LINE AND BATCH TRANSACTIONS FOR REFUGEE TRACKING  
SYSTEM AND MEDICARE BUY-IN**

Ref.: Article 7 and 15--Medi-Cal Eligibility Procedures Manual

The purpose of this letter is to inform you of the five data elements to be implemented on the Medi-Cal Eligibility Data System (MEDS). The MEDS screens containing these data elements are enclosed for your review. The Data Element Dictionary updates are also enclosed. We plan to accept these fields on MEDS beginning in December 1995 (online and batch updates). Counties will be requested to implement these changes **BY MARCH 1996 MONTH OF ELIGIBILITY**. These data elements can be used beginning December, but will be mandatory by March. Please continue present manual form MC 255 process until March even if you begin on-line transactions before March.

Counties will be required to report information on all new time-eligible and non time-eligible Refugees, and aged aliens. Counties may choose to report other alien information also. Counties currently are required to report all refugees on form MC 255 "Refugee Cross Reference Transaction". These forms are submitted monthly and are used to update the Refugee Tracking System. Some counties submit this information on tape, but most counties use the paper MC 255's. This information is used by the Department of Health Services (DHS) to claim 100 percent Federal Financial Participation (FFP) for Medi-Cal services rendered to time-eligible refugees. In order to claim this FFP, specific information such as the refugee's status and date of entry into the United States is required by the federal government. By allowing counties to report this information directly to MEDS, DHS expects more complete reporting of refugees and more accurate claiming of federal refugee funding, including targeting assistance funding which is additional federal funding for areas of high refugee population.

The request for information on aged aliens will allow DHS' Health Insurance Section to identify aged aliens who are not refugees and are not Medicare eligible because they have not met their five-year residency requirement and are not otherwise eligible for Medicare. All other alien information is optional but is requested for statistical purposes and for purposes of doing the secondary Systematic Alien Verification for Entitlements (SAVE) transactions before annual redetermination.

Five data elements will be implemented on MEDS:

(NOTE: Optional as used below only means that if you do not enter the information, eligibility will not be held up. The information for Refugees **MUST BE** entered per federal regulations.)

1. **REFUGEE ALIEN INDICATOR** - Codes 1, 7, and 8 will be used to identify all refugees (as reported on MC 255); Code 9 will be used to identify aged aliens who are not refugees and also are not Medicare eligible because they have not met their five-year residency requirement and are not otherwise eligible for Medicare; Code 0 can be used to report all other aliens.

To delete codes incorrectly entered on MEDS, follow the standard MEDS conventions; i.e., an asterisk (\*) for on-line and the data element number followed by an (=, ) for batch.

- 0 - Other Alien
- 1 - Indochinese Refugee
- 7 - Other Refugee
- 8 - Cuban/Haitian Refugee
- 9 - Aged Alien (Medicare ineligible and not 1, 7, or 8)
- \* - Delete Refugee/Alien Information

Optional - Must be entered for all refugees (1, 7, or 8), and aged aliens (9); but it can be entered later so as not to hold up eligibility. The Immigration and Naturalization Service (INS) Entry Date is required when the Refugee/Alien Indicator is 1, 7, 8, or 9.

If INS Entry Date is entered, an error message will be issued and the transaction will not process if the Refugee/Alien Indicator is left blank. (Refugee/Alien Indicator must be 0, 1, 7, 8, or 9).

A MEDS alert will be issued at Renewal if the current month aid Code is 01, 02, or 08, and the Refugee Alien Indicator and INS Entry Date have not been entered.

2. **ALIEN REGISTRATION NUMBER** - Counties are required to validate INS status on all non-citizen applications and re-certify each redetermination. If this number is entered into MEDS, DHS could automatically generate the SAVE transaction at redetermination so the counties will not have to submit it. (This is a future task.)

Optional - Necessary for SAVE transaction but no error message if not entered.

3. **INS ENTRY DATE** - The INS Entry Date is the month and year in which the refugee entered the United States and is the date from which the present eight-month eligibility period for Refugee special funding is determined. This is presently reported on the MC 255 and is mandatory for federal claiming.

Optional - Must be entered for time-eligible refugees (Refugee/Alien Indicator 1, 7, or 8), and aged aliens (Refugee/Alien Indicator 9); but it can be entered later so as not to hold up eligibility.

If Refugee/Alien Indicator 1, 7, 8, or 9 is entered, an error message will be issued if the INS Entry Date is left blank.

4. **COUNTRY OF ORIGIN** - For statistical purposes this is being added to MEDS.

Optional - Necessary for statistical purposes but no error message if not entered.

5. **ELIGIBILITY APPROVAL DATE** - The Medi-Cal Approval Date for medically needy recipients. Used by Buy-In to determine the effective date of Buy-In.

Optional - Must be entered for Aged Aliens (Refugee/Alien Indicator 9); but it can be entered later so as not to hold up eligibility. If Refugee/Alien Indicator 9 is entered, an error message will be issued if the Eligibility Approval Date is left blank. However the transaction will be processed and the other data elements will be updated.

The above modifications to MEDS will allow DHS to do the following:

1. Extract data for the RFG Tracking System to eliminate need for paper Form MC 255 and generate more accurate federal claim reporting. (Estimated Implementation March 1996)
2. Medicare Buy-In for Aged Aliens can be generated through MEDS automatically through SDX interface. (Estimated Implementation March 1996)
3. Develop extract files for Department of Social Services' reports to eventually eliminate paper form RS-237 and RS-238 reports. (Future Task)
4. Generate SAVE Secondary Verification before annual redetermination. (Future Task)
5. Alien Number will allow interface between MEDS and Statewide Client Index (SCI). (File-Clearance using Alien Number will be a future task)
6. MEDS lookup using Alien Number on the INQR Screen. (Future Task)

All County Welfare Directors  
All County Administrative Officers  
All County Medi-Cal Program Specialists/Liaisons  
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If you have any comments or suggestions on the above procedures to be implemented, please contact Elena Lara of my staff at (916) 657-0712.

Sincerely,

ORIGINAL SIGNED BY  
Frank S. Martucci, Chief  
Medi-Cal Eligibility Branch

Enclosures

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**MEDS NETWORK  
USER MANUAL**
**SECTION NUMBER: A2.4  
PAGE: 271**


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**APPENDIX II - DATA ELEMENT DICTIONARY**


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DED NO. 2009

**MEDS NETWORK NAME: SDX-ALIEN-STATUS****NARRATIVE NAME:** Refugee/Alien Indicator**AKA NAMES:** Alien Indicator, INDOCD, Alien Status Code**SOURCE:** County, SDX **LENGTH:** 1**DEFINITION:**

This code indicates whether the individual is a refugee or in a special alien status category. The information is used for the Refugee Tracking System and Buy-In.

**COUNTY INPUT VALUES:**

0	Other Alien
1	Indochinese Refugee
7	Other Refugee
8	Cuban/Haitian Refugee
9	Aged Alien

**SDX INPUT VALUES:**

F	Section 203(A)(7) alien (other refugee) The system changes this value to 7.
G	Section 212(D)(5) alien (parolee) The system changes this value to 7.
H	Silva vs. Levi alien
I	Indochinese alien The system changes this value to 1.
J	Deferred status alien The system changes this value to 8.
K	Other legal alien
L	Section 208, Asylum class (Cuban-Haitian). The system changes this value to 8.
M	Residents of the Northern Mariana Islands
P	Pre-1948 alien (presumed legal)

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APPENDIX II - DATA ELEMENT DICTIONARY

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DED NO. 2009

SPECIAL CONSIDERATIONS:

The INS Entry Date is required when the Refugee/Alien Indicator is a 1, 7, 8, or 9 or the Aid Code is 01, 02, or 08. If the Refugee/Alien Indicator exists on MEDS and is a 0, SDX will overlay it. SDX will not overlay an existing Refugee/Alien Indicator of 1, 7, 8, or 9. Refugee/Alien Indicators 1, 7, or 8 are used for the Refugee Tracking System. The Refugee/Alien Indicator 9 is used by Buy-In.

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APPENDIX II - DATA ELEMENT DICTIONARY

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DED No. 2008

MEDS NETWORK NAME: ALIEN NUMBER

NARRATIVE NAME: ALIEN NUMBER

AKA NAMES: ALIEN REGISTRATION NUMBER

SOURCE: COUNTY LENGTH: 9

DEFINITION: The ALIEN NUMBER is the number issued to aliens by the Immigration and Naturalization Service

VALUES: The format of the Alien Number issued by INS is an alpha prefix followed by 7, 8, or 9 digits. The prefix will always be an A, which will not be entered into MEDS. The numeric portion of the number should be entered with leading zeros appended to the 7 and 8 digit numbers. A total of 9 digits should be entered into MEDS. ..

SPECIAL CONSIDERATIONS: As of July 95, INS assigned numbers in these categories:

- 7 digit numbers - original numbers. They are no longer being issued.
- 8 digits numbers - 70 - 79 million range - Other assignments except Border Crossing and Amnesty  
80 - 89 million range - Border Crossing  
90 - 94 million range - Amnesty
- 9 digit numbers - 100 - 140 million range - Employment Allowance Document

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APPENDIX II - DATA ELEMENT DICTIONARY

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DED NO. 2005

MEDS NETWORK NAME: INS-ENTRY-DATE

NARRATIVE NAME: Alien Date of Entry

AKA NAMES: Alien Date of Residence

SOURCE: County, SDX

LENGTH: 4

DEFINITION:

This field identifies the reported date of entry into the United States or the month and year of residence in the United States. This field may be provided by counties or by the SDX file when the SDX file identifies a recipient as an alien and there is either an alien date of residence or a date of application present on the SDX file. This information is used for the Refugee Tracking System.

VALUES:

Date in the format MMYYY where MM is month and YY is year.

SPECIAL CONSIDERATIONS:

This is a required field when the county reports a Refugee/Alien Indicator of 1, 7, 8, or 9 or the Aid Code is 01, 02 or 03. If the SDX file identifies a recipient as an alien (see SDX-ALIEN-STATUS) and there is an alien date of residence present on the SDX file, this field will contain that date. Note: if the SDX alien date of residence was input prior to 10-80, the SDX month would have defaulted to January. If the SDX alien date of residence is prior to April 1975, MEDS posts a 04-75 date in this field. If the SDX file identifies a recipient as an alien and there is no alien date of residence present on the SDX file, MEDS will post the SDX date of application (which is the most recent SDX application date) in this field.



APPENDIX II - DATA ELEMENT DICTIONARY

DED No. 2035

MEDS NETWORK NAME: COUNTRY-OF-ORIGIN

NARRATIVE NAME: Country of Origin

AKA NAMES:

SOURCE: County, SDX

LENGTH: 2

DEFINITION: Country of Origin is the country of citizenship if known, otherwise, country of birth.

VALUES:

AF	AFGHANISTAN	HR	CROATIA	EI	IRELAND
AL	ALBANIA	CU	CUBA	IS	ISRAEL
AO	ANGOLA	CY	CYPRUS	IT	ITALY
AR	ARGENTINA	CZ	CZECHOSLOVAKIA	IV	IVORY COAST
AM	ARMENIA	DJ	DJIBOUTI	JM	JAMAICA
AS	AUSTRALIA	DR	DOMINICAN REPUBLIC	JA	JAPAN
AU	AUSTRIA	EC	ECUADOR	JO	JORDAN
AJ	AZERBAIJAN	EG	EGYPT	CB	KAMPUCHEA
BG	BANGLADESH	ES	EL SALVADOR	KZ	KAZAKHSTAN
BO	BELARUS	ER	ERITREA	KE	KENYA
BE	BELGIUM	EN	ESTONIA	KN	KOREA (NORTH)
BN	BENIN	ET	ETHIOPIA	KS	KOREA (SOUTH)
BL	BOLIVIA	FI	FINLAND	KU	KUWAIT
BK	BOSNIA and HERCEGOVINA	FR	FRANCE	KG	KYRGYZSTAN
BC	BOTSWANA	GG	GEORGIA	LA	LAOS
BR	BRAZIL	GM	GERMANY	LG	LATVIA
BU	BULGARIA	GH	GHANA	LE	LEBANON
BM	BURMA	GR	GREECE	LT	LESOTHO
BY	BURUNDI	GT	GUATEMALA	LI	LIBERIA
CM	CAMEROON	HA	HAITI	LY	LIBYA
CA	CANADA	HO	HONDURAS	LH	LITHUANIA
CD	CHAD	HK	HONG KONG	MC	MACAU
CI	CHILE	HU	HUNGARY	MK	MACEDONIA
CH	CHINA	IN	INDIA	MI	MALAWI
CO	COLOMBIA	ID	INDONESIA	MY	MALAYSIA
CS	COSTA RICA	IR	IRAN	MX	MEXICO
		IZ	IRAQ	MD	MOLDOVA

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APPENDIX II - DATA ELEMENT DICTIONARY

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DED No. 2035

VALUES (CONT.):

MG	MONGOLIA	SR	SERBIA	UK	UNITED KINGDOM
MW	MONTENEGRO	SN	SINGAPORE		(ENGLAND)
MO	MOROCCO	SI	SLOVENIA	UY	URUGUAY
MZ	MOZAMBIQUE	SO	SOMALIA	UR	USSR (FORMER)
WA	NAMIBIA	SF	SOUTH AFRICA	UZ	UZBEKISTAN
NL	NETHERLANDS	SP	SPAIN	VE	VENEZUELA
NC	NEW CALEDONIA	CE	SRI LANKA	VM	VIETNAM
NZ	NEW ZEALAND	SU	SUDAN	YE	YEMEN
NU	NICARAGUA	SZ	SWITZERLAND	YS	YEMEN ADEN
NI	NIGERIA	SY	SYRIA	YO	YUGOSLAVIA
PK	PAKISTAN	TW	TAIWAN	CG	ZAIRE
PM	PANAMA	TI	TAJIKISTAN	ZA	ZAMBIA
PA	PARAGUAY	TZ	TANZANIA	ZI	ZIMBABWE
PE	PERU	TH	THAILAND	OB	BORN ON
RP	PHILIPPINES	TS	TUNISIA		BOARD/SEA
PL	POLAND	TU	TURKEY	ZN	STATELESS
PO	PORTUGAL	TX	TURKMENISTAN	ZZ	UNKNOWN
RO	ROMANIA	UG	UGANDA		
RS	RUSSIA	UP	UKRAINE		
RW	RWANDA	TC	UNITED ARAB		
SA	SAUDI ARABIA		EMIRATES		
SG	SENEGAL				

SPECIAL CONSIDERATION:

The Country-of-Origin values are the same as the Federal Information Processing Standards.

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APPENDIX II - DATA ELEMENT DICTIONARY

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DED NO. 0866

MEDS NETWORK NAME: ELIGIBILITY-APPROVAL-DATE

NARRATIVE NAME: Disability/Blindness Onset Date  
Medically Needy Approval Date

AKA NAMES: MN Approval Date

SOURCE: County LENGTH: 6

DEFINITION:

The MEDI-Cal approval date for medically needy recipients. Used by Buy-In to determine the effective date of Buy-In.

VALUES:

Date in the format MMDDYY where MM is month DD is day and YY is year.

SPECIAL CONSIDERATIONS:

INQR INQR

\*\* RECIPIENT INQUIRY REQUEST \*\*

SELECT INQUIRY OPTION ?

A = ADDRESS INFORMATION  
B = BUY-IN AND BENDEX  
F = FOOD STAMP  
H = HEALTH CARE PLANS AND OTHER HEALTH COVERAGE  
M = MEDI-CAL/CMSP -- PRIMARY  
O = OTHER MISCELLANEOUS  
P = PENDING/DENIED APPLICATIONS & APPEALS  
X = TITLE XVI -- SSI/SSP  
1 = MEDI-CAL/CMSP -- SPECIAL PROGRAM 1  
2 = MEDI-CAL/CMSP -- SPECIAL PROGRAM 2  
3 = MEDI-CAL/CMSP -- PENDING  
4 = MEDI-CAL/CMSP -- FUTURE PENDING  
5 = MEDI-CAL/CMSP -- 13-15 MONTHS PRIOR

RECIPIENT IDENTIFICATION:  
(ENTER ONE)

MEDS-ID: \_\_\_\_\_  
COUNTY-ID: \_\_\_\_\_  
HIC-NO: \_\_\_\_\_  
CLIENT-INDEX-NO: \_\_\_\_\_  
CA-DL/ID-NO: \*\*\*\*\*  
ALIEN-NO \*\*\*\*\*  
#

#

Designates a screen revision (new field).

Alien-No will not be available on INQR in December 1995. This will be activated at a later date.

QOTH INQO

\*\* OTHER MISCELLANEOUS INFORMATION \*\*

BMS - 04/11/95

R

MEDS-ID

NAME

BIRTHDATE

CA-DL/ID-NO

CLIENT-INDEX-NO

ALIEN-NO #

PHONE

AUTH-REP-NAME

ETHNIC

LANGUAGE

AUTH-REP-ADDR

SSN-VER-BIRTHDATE

DEATH-POSTED

EXPECTED-DELIVERY-DATE

ELIG-APPROVAL-DATE

COUNTRY-OF-ORIGIN

REFUGEE/ALIEN

INS-ENTRY-MMY

PICKLE-TICKLER

LAST-PICKLE-CHG

SSI-LAST-RECEIVED

LAST-MC/CP-CHG

LAST-FS-CHG

LAST-OTHER-CHG

LAST-MC/CP-TRANS

LAST-FS-TRANS

LAST-OTHER-TRANS

FILE-FIX-DATE

CARD-ISSUE-DATE

PAPER-CARD-DATE

PGM-ELIG: MC/CP C H SP1

SP2

FS

AFDC C H

1995

> 1994

12-95 PEND JAN FEB MAR APR MAY JUN JUL AUG SEP OCT NOV DEC

ORIG-AID

NEG-ACTN

MULTI-SOC

OPTION \_\_\_ < PRESS PF13 FOR LIST OF VALID OPTIONS > \* ENTER KEY RETURNS TO LIST

W05

\*\* TRANSFER COUNTY OF RESPONSIBILITY \*\*

HZS - 04/24/95

CASE-NAME

DISTRICT

EW-CODE

COUNTY-ID: PER-MEDS

ALTERNATE

MEDS-ID

BIRTHDATE

NEW-BIRTHDATE \*\*\*\*\*

NAME: LAST

FIRST

INITIAL

SEX

ETHNIC

LANGUAGE

SSN-VER

CA-DL/ID-NO

HIC-NO

ADDRESS: C/O

STREET

CITY

STATE

ZIP-CODE

PHONE ( )

COUNTRY-OF-ORIGIN

ALIEN-NO

EFFECTIVE-DATE

TERM-DATE

TERM-REAS

ESAC

REDETERM-MONTH

%-OBLIG \*\*

SOC-AMOUNT

LTC-IND

SOC-FBU

MEDS-OHC \*

RESTRICTION

ORIG-AID

NEW-OHC

REFUGEE/ALIEN

INS-ENTRY-MMY

CARD-REQUEST-REASON

FIRST

INITIAL

CODE

ALIAS/SSA-NAME: LAST

NEXT-TRANS \*\*\*\*

SAME-PERSON \*

SAME-CASE \*

EW20

\*\* ADD NEW CLIENT RECORD \*\*

HZS - 07/13/95

CASE-NAME

DISTRICT

EW-CODE

COUNTY-ID: PER-MEDS

ALTERNATE

MEDS-ID

BIRTHDATE

NEW-BIRTHDATE \*\*\*\*\*

NAME: LAST

FIRST

INITIAL

SEX

ETHNIC

LANGUAGE

SSN-VER

CA-DL/ID-NO

HIC-NO

ADDRESS: C/O

STREET

CITY

STATE

ZIP-CODE

PHONE ( )

COUNTRY-OF-ORIGIN

ALIEN-NO

EFFECTIVE-DATE

TERM-DATE

TERM-REAS

ESAC

REDETERM-MONTH

%OBLIG

SOC-AMOUNT

LTC-IND

SOC-FBU

MEDS-OHC \*

RESTRICTION

ORIG-AID

NEW-OHC

REFUGEE/ALIEN

INS-ENTRY-MMY

ELIG-APPROVAL-DATE

APPLICATION-DATE

RETRO

CARD-REQUEST-REASON

FIRST

INITIAL

CODE

ALIAS/SSA-NAME: LAST

NEXT-TRANS

SAME-PERSON \*

SAME-CASE \*

EW30

**\*\* MODIFY CURRENT/FUTURE \*\***

CASE-NAME

DISTRICT

EW-CODE

COUNTY-ID: PER-MEDS

NEW \*\*

MEDS-ID

BIRTHDATE

NEW-BIRTHDATE

NAME: LAST

FIRST

INITIAL

SEX

ETHNIC

LANGUAGE

SSN-VER

CA-DL/ID-NO

HIC-NO

ADDRESS: C/O

STREET

CITY

STATE

ZIP-CODE

ADDRESS-FLAG

COUNTRY-OF-ORIGIN

ALIEN-NO

PHONE ( )

TERM-DATE

TERM-REAS

EFFECTIVE-DATE

REDETERM-MONTH

%-OBLIG

ESAC

LTC-IND

SOC-FBU

SOC-AMOUNT

RESTRICTION

ORIG-AID

MEDS-OHC \*

REFUGEE/ALIEN

INS-ENTRY-MMY

NEW-OHC

APPLICATION-DATE

RETRO

ELIG-APPROVAL-DATE

RECOVERY

CARD-REQUEST-REASON

ALIAS/SSA-NAME: LAST

FIRST

INITIAL

CODE

NEXT-TRANS \*\*\*\*\*

SAME-PERSON \*\*

SAME-CASE \*



W55

\*\* SSI/SSP MODIFY/ID CARD REQUEST \*\*

BMS - 04/24/95

CASE-NAME

DISTRICT

EW-CODE

COUNTY-ID-PER-MEDS

MEDS-ID

BIRTHDATE

NEW-BIRTHDATE

NAME: LAST

SEX

FIRST

CA-DL/ID-NO

INITIAL

ADDRESS: C/O

STREET

CITY

STATE

ZIP-CODE

PHONE ( )

MEDS-OHC

NEW-OHC

REFUGEE/ALIEN

ALIEN-NO

INS-ENTRY-MMY

VALID-MMY

CARD-ISSUE-SITE

CARD-REQUEST-REASON

NEXT-TRANS \*\*\*\*

SAME-PERSON \*

SAME-CASE \*

50

\*\* ELIGIBILITY OVER 12 MONTHS PRIOR \*\*

BMS - 04 /24/95

CASE-NAME

DISTRICT

EW-CODE

COUNTY-ID-PER-MEDS

MEDS-ID

BIRTHDATE

NEW BIRTHDATE

NAME: LAST

SEX

FIRST

CA-DL/ID-NO

COUNTRY-OF-ORIGIN \*\*

INITIAL

HIC-NO

ALIEN-NO \*\*

ESAC

SOC-AMOUNT

MEDS-OHC \*

NEW-OHC

LTC-IND

RESTRICTION

REFUGEE/ALIEN

%OBLIG

SOC-FBU

ORIG-AID

INS-ENTRY-MMY1

CERT-DAY

VALID-MMY1

CARD-ISSUE-SITE

CARD-REQUEST-REASON

NEXT-TRANS \*\*\*\*

SAME-PERSON \*

SAME-CASE \*